

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing

# PHA Plans

## 5 Year Plan for Fiscal Years

## 2005 Annual Plan for Fiscal Year – Troubled PHA

*Taos County Housing Authority*  
*NM038vo3*

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PHA NOTICES**

**Year 14 Page 1 of 30 HUD**

**PHA Plan  
Agency Identification**

**PHA Name:** Taos County Housing Authority

**PHA Number:** NM038

**PHA Fiscal Year Beginning:** 07/2005

**Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)**

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices

**Display Locations for PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices
- ☐ Main administrative office of the local government
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2005 - 2009**  
[24 CFR Part 903.5]

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- ☒ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- ☒ The PHA's mission is: To promote **Self-empowering** Services, provide **Safe, Sensible** and **Suitable** housing to our clients.

**B. Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- ☒ PHA Goal: Expand the supply of assisted housing  
Objectives:
- ☐ Apply for additional rental vouchers:
  - ☒ Reduce public housing vacancies:
  - ☒ Leverage private or other public funds to create additional housing opportunities:
  - ☐ Acquire or build units or developments
  - ☐ Other (list below)
- ☒ PHA Goal: Improve the quality of assisted housing  
Objectives:
- ☒ Improve public housing management: (PHAS score)
  - ☒ Improve voucher management: (SEMAP score)
  - ☒ Increase customer satisfaction:
  - ☒ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
  - ☒ Renovate or modernize public housing units:
  - ☐ Demolish or dispose of obsolete public housing:
  - ☐ Provide replacement public housing:

- ☐ Provide replacement vouchers:
- ☐ Other: (list below)

☒ PHA Goal: Increase assisted housing choices

Objectives:

- ☐ Provide voucher mobility counseling:
- ☒ Conduct outreach efforts to potential voucher landlords
- ☐ Increase voucher payment standards
- ☒ Implement voucher homeownership program:
- ☐ Implement public housing or other homeownership programs:
- ☐ Implement public housing site-based waiting lists:
- ☐ Convert public housing to vouchers:
- ☐ Other: (list below)

**HUD Strategic Goal: Improve community quality of life and economic vitality**

☒ PHA Goal: Provide an improved living environment

Objectives:

- ☒ Implement measures to de-concentrate poverty by bringing higher income public housing households into lower income developments:
- ☒ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- ☒ Implement public housing security improvements:
- ☐ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- ☐ Other: (list below)

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

☒ PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- ☒ Increase the number and percentage of employed persons in assisted families:
- ☒ Provide or attract supportive services to improve assistance recipients' employability:
- ☒ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- ☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
- ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
  - ☒ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
  - ☒ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - ☐ Other: (list below)

**Other PHA Goals and Objectives:**

**Work with community leaders/organizations/agencies/housing community to promote fair and equal housing choices for low-income families.**

**Annual PHA Plan**  
**PHA Fiscal Year 2005**

[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

☒ **Standard Plan**

**Streamlined Plan:**

- ☐ **High Performing PHA**
- ☐ **Small Agency (<250 Public Housing Units)**
- ☐ **Administering Section 8 Only**

☒ **Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The PHA will promote homeownership for the Section 8 Program. All Policies have been reviewed and are in compliance with the policies set forth by HUD and those adopted by the Authority.

**iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

**Table of Contents**

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## Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

### Required Attachments:

☒ Admissions Policy for De-concentration - **Attachment A**

## ADMISSIONS AND CONTINUED OCCUPANCY POLICY

### De-Concentration Policy

Section 513 of the Quality Housing and Work Responsibility Act of 1998 amends Section 16 of the USHA to establish public housing de-concentration requirements.

The QHWA requires PHA's to submit with their annual public housing agency plan an admissions policy designed to provide for de-concentration of poverty and income mixing, by bringing higher income tenants into lower income public housing sites and bringing lower income tenants into higher income public housing projects.

APHA may offer incentives for eligible families having higher income to occupy dwelling units in housing sites predominantly occupied by eligible families having lower incomes in public housing sites predominantly occupied by eligible families having higher incomes.

Incentives may be made in a manner that allows the eligible family to have the sole discretion in determining, whether to accept the incentive and the PHA may not take any adverse action toward the family for not accepting the incentive and occupancy of a housing site having lower incomes, provided that the skipping of a family to reach an other family to implement the policy shall not be considered an adverse action.

The PHA must implement this Admission Policy in a manner that does not interfere with the use of site based waiting list authorized under QHWRA\*.

\*Though incentives may be offered as part of QHWRA, the PHA does not intend to offer incentives until such time as HUD offers clear guidance on the provision of incentives by the PHA.

Through the February 18, 1999 initial guidance Notice, HUD is requiring PHA's to begin implementing this public housing de-concentration policy. Within 120 days of the Notice (June 18, 1999), The PHA's Policy Board must pass a resolution indicating that any necessary changes have been made in the PHA's admission policy to promote de-concentration of poverty also will be part of the PHA plan process from its inception.

### Site-Based Waiting List

PHA's may institute site-based waiting list. All civil rights and fair housing laws must be complied with. \*

\*Though PHA's may institute site-based waiting list as part of QHWRA, the PHA does not intend to institute a site-based application system until such time as HUD officers clear guidance on the implementation of site-based waiting lists by the PHA.

Page 2

De-concentration Policy

### Income Targeting

PHA's with public housing must reserve at least 40% of its public housing new admissions each fiscal year for families whose incomes do not exceed 30% of the area medium income. PHA's that exceed the Section 8 minimum rule of 75% may apply a portion of the excess to the public housing goal. This provision is called fungibility because to a limited extent, it makes the targeting requirements in public housing and tenant based assistance interchangeable or fungible. There are three further limitations on a PHA's use of fungibility. Fungibility credits only can be used to drop the annual requirement for housing very poor families below 40% of newly available units in public housing, by the lowest of the following amounts:

- A.) The number of units equivalent to (10%) percent of the number of newly available vouchers and certificates in that fiscal year.
- B.) The number of units that (i) are in sites located in census tracts having a poverty rate of 30% or more and (ii) are made available for occupancy by and actually occupied in that year by families other than very poor families.
- C.) The number of units that cause the PHA's overall requirement for housing very poor families to drop to 30% of its newly available units.

The income targeting requirements will be applied on prorata bases to the remainder of the PHA's current fiscal year starting with April 11, 1999 to the end of the current fiscal year, and thereafter by applicable fiscal year.

### Federal Preferences

The QHWRA permanently repeals federal preference requirements for Public Housing and Section 8 Programs. PHA's need to make adjustments in their admissions policies to assure the preferences used comply with public housing de-concentration and public housing and Section 8 income targeting. Local preferences may be established based on local housing needs and priorities as determined by the PHA, including comments received during the public hearing for the PHA plan, and information from the local consolidated plan. Existing local preferences may remain without further PHA action or may be altered as authorized before QHWRA. A PHA may establish, after Public Notice an opportunity for Public comment, a written system of preferences for selection that is not inconsistent with the Local or State Consolidated Plan. The preference for admitting elderly, disabled, and displaced persons before other single persons has been eliminated. PHA's must revise their Admissions and Continued Occupancy Policy when writing their five-year plan.



FY 2005 Capital Fund Program Annual Statement - **Attachment B**

# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHA Name: Taos County Housing Authority	Grant Type and Number Capital Fund Program: NM02P038501-05 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2005
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☒ Original Annual Statement
 ☐ Reserve for Disasters/ Emergencies
 ☒ Revised Annual Statement (revision no: )
 ☐ Performance and Evaluation Report for Period Ending:
 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$ 6,643.00			
3	1408 Management Improvements				
4	1410 Administration	\$ 35,000.00			
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	\$ 25,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$250,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	\$ 2,500.00			
13	1475 Non-dwelling Equipment	\$ 30,000.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency	\$ 10,000.00			
20	Amount of Annual Grant: (sum of lines 2-19)	\$359,143.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security	\$ 20,000.00			

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

<b>PHA Name:</b> Taos County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: NM02P038501-05 Capital Fund Program Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2005	
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input checked="" type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>					
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
24	Amount of line 20 Related to Energy Conservation Measures	\$20,000.00			

**Annual Statement/Performance and Evaluation Report****Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part II: Supporting Pages**

PHA Name: Taos County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program #: NM02P038501-05 Capital Fund Program Replacement Housing Factor #:				<b>Federal FY of Grant:</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
NM038	Operations	1406		6,643				
	Administration	1410		35,000				
	Fees and Costs	1430	1	25,000				
H/A Wide	<b>Dwelling Structures</b>	1460	83	250,000				
	Replace Kitchen Cabinets, Vanities, Interior Doors, Flooring 2004 Shortfall Exterior Doors, Windows and Screens							
	Non-Dwelling Structures	1470	1	2,500				
	Garage Storage Cabinets/Shelving							
	Non-Dwelling Equipment	1475	1	30,000				
	Contingency	1502		10,000				

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

[illegible]

- ☒ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY) **Attachment C**

Optional Attachments:

- ☐ PHA Management Organizational Chart  
☐ FY 2005 Capital Fund Program 5 Year Action Plan  
☐ Public Housing Drug Elimination Program (PHDEP) Plan  
☐ Comments of Resident Advisory Board or Boards : **NO COMMENTS RECEIVED**

- ☒ Other  
**Police Officer Unit Designation/Resource Room –Attachment D**

**Supporting Documents Available for Review**

Indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
x	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
x	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
x	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
x	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
x	Public Housing De-concentration and Income Mixing Documentation: 1. PHA board certifications of compliance with de-concentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required de-concentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
x	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
x	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
x	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
x	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
x	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
x	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
x	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
x	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the	Annual Plan: Conversion of Public Housing

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	1996 HUD Appropriations Act	
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
x	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
x	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
x	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
x	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

## **1. Statement of Housing Needs**

[24 CFR Part 903.7 9 (a)]

### **A. Housing Needs of Families in the Jurisdiction/s Served by the PHA**

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	611	5	3	4	3		
Income >30% but <=50% of AMI	350	5	3	4	3		
Income >50% but <80% of AMI	442	4	3	4	2		
Elderly	N/A						
Families with Disabilities	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☐ Consolidated Plan of the Jurisdiction/s  
Indicate year:
- ☒ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- ☐ American Housing Survey data  
Indicate year:
- ☐ Other housing market study  
Indicate year:
- ☐ Other sources: (list and indicate year of information)

### **B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists**

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input checked="" type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/sub-jurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	415		200
Extremely low income <=30% AMI	125		
Very low income (>30% but <=50% AMI)	189		
Low income (>50% but <80% AMI)	101		
Families with children	183		
Elderly families	77		
Families with Disabilities	132		
Race/ethnicity			
Race/ethnicity			
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	132		
2 BR	43		
3 BR	11		
4 BR	3		
5 BR	1		
5+ BR	0		
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

#### **Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:**

Select all that apply

- ☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☒ Reduce turnover time for vacated public housing units
- ☒ Reduce time to renovate public housing units
- ☐ Seek replacement of public housing units lost to the inventory through mixed finance development
- ☐ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- ☒ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☒ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☒ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☐ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- ☐ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- ☐ Other (list below)

#### **Strategy 2: Increase the number of affordable housing units by:**

Select all that apply

- ☐ Apply for additional section 8 units should they become available
- ☒ Leverage affordable housing resources in the community through the creation of mixed - finance housing
- ☐ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- ☐ Other: (list below)

**Need: Specific Family Types: Families at or below 30% of median**

**Strategy 1: Target available assistance to families at or below 30 % of AMI**

Select all that apply

- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- ☐ Employ admissions preferences aimed at families with economic hardships
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

**Need: Specific Family Types: Families at or below 50% of median****Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

- ☐ Employ admissions preferences aimed at families who are working
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

**Need: Specific Family Types: The Elderly****Strategy 1: Target available assistance to the elderly:**

Select all that apply

- ☐ Seek designation of public housing for the elderly
- ☒ Apply for special-purpose vouchers targeted to the elderly, should they become available
- ☐ Other: (list below)

**Need: Specific Family Types: Families with Disabilities****Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- ☐ Seek designation of public housing for families with disabilities
- ☒ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- ☐ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- ☒ Affirmatively market to local non-profit agencies that assist families with disabilities
- ☐ Other: (list below)

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

**Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Select if applicable

- ☒ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- ☐ Other: (list below)

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

- ☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- ☒ Market the section 8 program to owners outside of areas of poverty /minority concentrations
- ☐ Other: (list below)

**Other Housing Needs & Strategies: (list needs and strategies below)**

**(2) Reasons for Selecting Strategies**

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☒ Funding constraints
- ☒ Staffing constraints
- ☒ Limited availability of sites for assisted housing
- ☒ Extent to which particular housing needs are met by other organizations in the community
- ☒ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☒ Influence of the housing market on PHA programs
- ☒ Community priorities regarding housing assistance
- ☒ Results of consultation with local or state government
- ☒ Results of consultation with residents and the Resident Advisory Board
- ☒ Results of consultation with advocacy groups
- ☐ Other: (list below)

## 2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2005 grants)</b>		
a) Public Housing Operating Fund	350,980.00	
b) Public Housing Capital Fund	359,143.00	
c) HOPE VI Revitalization	-0-	
d) HOPE VI Demolition	-0-	
e) Annual Contributions for Section 8 Tenant-Based Assistance	2,210,523	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	-0-	
g) Resident Opportunity and Self-Sufficiency Grants	-0-	
h) Community Development Block Grant	-0-	
i) HOME	-0-	
Other Federal Grants (list below)	-0-	
<b>2. Prior Year Federal Grants (un-obligated funds only) (list below)</b>	-0-	
<b>3. Public Housing Dwelling Rental Income</b>		
<b>Dwelling Rent</b>	\$280,000.00	Adm./Operating Expenses
<b>4. Other income (list below)</b>		
Late Fee/Tenant Charges	\$ 10,800.00	Operating Expenses
<b>4. Non-federal sources (list below)</b>		
	-0-	

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
<b>Total resources</b>	\$290,800.00	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.7 9 (c)]

#### **A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

##### **(1) Eligibility**

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- ☐ When families are within a certain number of being offered a unit: (state number)  
☐ When families are within a certain time of being offered a unit: (state time)  
☒ Other: When unit becomes available.

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- ☒ Criminal or Drug-related activity  
☒ Rental history  
☒ Housekeeping  
☐ Other (describe)

c. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. ☒ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? **Through an NCIC-authorized source**

##### **(2)Waiting List Organization**

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- ☒ Community-wide list  
☐ Sub-jurisdictional lists  
☐ Site-based waiting lists  
☐ Other (describe)

b. Where may interested persons apply for admission to public housing?

- ☒ PHA main administrative office
- ☐ PHA development site management office
- ☐ Other (list below)

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?

2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists?

3. ☐ Yes ☐ No: May families be on more than one list simultaneously?  
If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- ☐ PHA main administrative office
- ☐ All PHA development management offices
- ☐ Management offices at developments with site-based waiting lists
- ☐ At the development to which they would like to apply
- ☐ Other (list below)

### **(3) Assignment**

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- ☒ One
- ☐ Two
- ☐ Three or More

b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

### **(4) Admissions Preferences**

a. Income targeting:

- ☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- ☒ Emergencies  
☒ Over housed  
☒ Under housed  
☒ Medical justification  
☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)  
☒ Resident choice: **Requesting transfer in writing and waiting list exhausted.**  
☐ Other: (list below)

c. Preferences

1. ☐ Yes ☒ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  
☐ Victims of domestic violence  
☐ Substandard housing  
☐ Homelessness  
☐ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☐ Working families and those unable to work because of age or disability  
☐ Veterans and veterans' families  
☐ Residents who live and/or work in the jurisdiction  
☐ Those enrolled currently in educational, training, or upward mobility programs  
☐ Households that contribute to meeting income goals (broad range of incomes)  
☐ Households that contribute to meeting income requirements (targeting)  
☐ Those previously enrolled in educational, training, or upward mobility programs  
☐ Victims of reprisals or hate crimes  
☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second

priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

#### Date and Time

#### Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  
Victims of domestic violence  
Substandard housing  
Homelessness  
High rent burden

#### Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

#### 4. Relationship of preferences to income targeting requirements:

- ☐ The PHA applies preferences within income tiers
- ☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

### **(5) Occupancy**

#### a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- ☒ The PHA-resident lease
- ☒ The PHA's Admissions and (Continued) Occupancy policy
- ☒ PHA briefing seminars or written materials
- ☐ Other source (list)

#### b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- ☒ At an annual reexamination and lease renewal
- ☒ Any time family composition changes

- ☒ At family request for revision  
☐ Other (list)

**(6) De-concentration and Income Mixing**

- a. ☐ Yes ☒ No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote de-concentration of poverty or income mixing?
- b. ☐ Yes ☒ No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote de-concentration of poverty or to assure income mixing?
- c. If the answer to b was yes, what changes were adopted? (select all that apply)
- ☐ Adoption of site based waiting lists  
If selected, list targeted developments below:
- ☐ Employing waiting list "skipping" to achieve de-concentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:
- ☐ Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- ☐ Other (list policies and developments targeted below)
- d. ☐ Yes ☒ No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for de-concentration of poverty and income mixing?
- e. If the answer to d was yes, how would you describe these changes? (select all that apply)
- ☐ Additional affirmative marketing  
☐ Actions to improve the marketability of certain developments  
☐ Adoption or adjustment of ceiling rents for certain developments  
☐ Adoption of rent incentives to encourage de-concentration of poverty and income-mixing  
☐ Other (list below)
- f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

- ☒ Not applicable: results of analysis did not indicate a need for such efforts  
☐ List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- ☒ Not applicable: results of analysis did not indicate a need for such efforts  
☐ List (any applicable) developments below:

## B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B.

**Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

### (1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- ☒ Criminal or drug-related activity only to the extent required by law or regulation  
☐ Criminal and drug-related activity, more extensively than required by law or regulation  
☐ More general screening than criminal and drug-related activity (list factors below)  
☐ Other (list below)
- b. ☐ Yes ☒ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. ☐ Yes ☒ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. ☐ Yes ☒ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- ☒ Criminal or drug-related activity  
☐ Other (describe below)

### (2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- ☒ None  
☐ Federal public housing  
☐ Federal moderate rehabilitation  
☐ Federal project-based certificate program

☐ Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)

☒ PHA main administrative office

☐ Other (list below)

### **(3) Search Time**

a. ☒ Yes ☐ No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

*The Taos County Housing Authority will give up to an additional 30 day extension to increase housing opportunities to qualified applicants. Additional extensions are generally limited to approve reasonable accommodation requests for households with a member who is a person with disabilities.*

### **(4) Admissions Preferences**

a. Income targeting

☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. ☐ Yes ☒ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

1. Which of the following admission preferences does the PHA plan to employ in the coming year?

Former Federal preferences

☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

☐ Victims of domestic violence

☐ Substandard housing

☐ Homelessness

☐ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  
Victims of domestic violence  
Substandard housing  
Homelessness  
High rent burden

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- ☐ Date and time of application
- ☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- ☐ This preference has previously been reviewed and approved by HUD  
☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- ☐ The PHA applies preferences within income tiers  
☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

**(5) Special Purpose Section 8 Assistance Programs**

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- ☒ The Section 8 Administrative Plan  
☒ Briefing sessions and written materials  
☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- ☐ Through published notices  
☒ Other *Local News Media*

**4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

**A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

**(1) Income Based Rent Policies**

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- ☒ The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- ☐ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0  
☐ \$1-\$25  
☒ \$26-\$50

2. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

c. Rents set at less than 30% than adjusted income

1. ☐ Yes ☒ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- ☒ For the earned income of a previously unemployed household member  
☐ For increases in earned income  
☐ Fixed amount (other than general rent-setting policy)  
If yes, state amount/s and circumstances below:

☐ Fixed percentage (other than general rent-setting policy)  
If yes, state percentage/s and circumstances below:

- ☐ For household heads  
☐ For other family members  
☐ For transportation expenses  
☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families  
☐ Other (describe below)

e. Ceiling rents - N/A

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income)  
(select one)

- ☐ Yes for all developments  
☐ Yes but only for some developments  
☒ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- ☐ For all developments  
☐ For all general occupancy developments (not elderly or disabled or elderly only)  
☐ For specified general occupancy developments  
☐ For certain parts of developments; e.g., the high-rise portion  
☐ For certain size units; e.g., larger bedroom sizes  
☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents

- ☐ Market comparability study  
☐ Fair market rents (FMR)  
☐ 95<sup>th</sup> percentile rents  
☐ 75 percent of operating costs  
☐ 100 percent of operating costs for general occupancy (family) developments  
☐ Operating costs plus debt service  
☐ The "rental value" of the unit  
☒ Other *N/A*

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- ☐ Never  
☐ At family option  
☐ Any time the family experiences an income increase  
☐ Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_  
☒ Other *N/A*

g. ☐ Yes ☒ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

**(2) Flat Rents**

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- ☒ The section 8 rent reasonableness study of comparable housing
- ☐ Survey of rents listed in local newspaper
- ☐ Survey of similar unassisted units in the neighborhood
- ☐ Other (list/describe below)

## B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

### (1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- ☒ At or above 90% but below 100% of FMR
- ☐ 100% of FMR
- ☐ Above 100% but at or below 110% of FMR
- ☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- ☒ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ The PHA has chosen to serve additional families by lowering the payment standard
- ☐ Reflects market or submarket
- ☐ Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level?

- ☒ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ Reflects market or submarket
- ☒ To increase housing options for families
- ☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- ☒ Annually
- ☐ Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- ☒ Success rates of assisted families  
☒ Rent burdens of assisted families  
☐ Other (list below)

## **(2) Minimum Rent**

a. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0  
☒ \$1-\$25  
☐ \$26-\$50

b. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

- ☒ An organization chart showing the PHA's management structure and organization is attached. (**Attachment Q**)  
☒ A brief description of the management structure and organization of the PHA follows:

***Taos County Board of Commissioners/Taos County Housing Authority Board  
Executive Director – all staff members are under the direction of the ED, as follows:***

***Administrative – Finance Specialist (1), Fee Accountant (1), FSS Coordinator (1),  
CFP Coordinator (1)***

***Section 8 - Manager (1), Coordinator (1) and HQS Inspector (1)***

***Low Public Housing – PHA Coordinator (2), Maintenance Supervisor (1),***

***Under direct supervision of the Maintenance Supervisor: Maintenance Mechanic (2),  
Maintenance Mechanic/HQS Quality Control Officer (1)***

### **B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	169	35%

Section 8 Vouchers	432	40%
Section 8 Certificates	N/A	
Section 8 Mod Rehab	N/A	
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	
Public Housing Drug Elimination Program (PHDEP)	N/A	
Other Federal Programs(list individually)		

### C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

#### (1) Public Housing Maintenance and Management:

##### **TENANT**

Admissions and Occupancy  
Affirmative Action Plan  
Collections  
De-Concentration Policy  
Equal Housing Opportunity  
Housing Unit Abandonment Rule  
Grievance Procedures (Tenant)  
Maintenance Policy  
One Strike and You're Out  
Pest Control  
Pet Policy/Procedures  
Resident Initiatives/FSS Action Plan  
Statement of Tenant Charges  
Statement of Security Deposit Charge  
Dwelling Lease (Terms and Conditions)  
Things You Should Know Statement  
Application

##### **ADMINISTRATION**

Capitalization  
Check Signing  
Delegation of Authority  
Disposition  
Drug Free Work Place  
Ethic  
Fund Transfers  
Internal Control Procedures  
Investment  
Procurement  
Statement of Personnel  
Annual Contributions Contract  
Organizational Chart

#### (2) Section 8 Management:

Section 8 Administration Action Plan Revised 11/2004  
Financial Assistance Contracts with HUD  
Things You Should Know Statement

*Please Note:* In addition to the policies listed above, all policies and procedures adopted by Taos County Government are followed and implemented by the Housing Authority unless Federal Rules and Regulations are more stringent.

Tenant policies and procedures are in place. The policies and procedures are reviewed and revised as needed. All revisions are approved and adopted by the Taos County Housing Authority Board by resolution.

## **6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

### **A. Public Housing**

1. ☐ Yes ☒ No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- ☒ PHA main administrative office  
☐ PHA development management offices  
☐ Other (list below)

### **B. Section 8 Tenant-Based Assistance**

1. ☐ Yes ☒ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- ☒ PHA main administrative office  
☐ Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

### **A. Capital Fund Activities**

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

#### **(1) Capital Fund Program Annual Statement**

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

☐ The Capital Fund Program Annual Statement is provided below:

#### **(2) Optional 5-Year Action Plan**

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. ☐ Yes ☒ No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

☐ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment

-or-

☐ The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

### **B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)**

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)

b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- ☐ Revitalization Plan under development  
☐ Revitalization Plan submitted, pending approval  
☐ Revitalization Plan approved  
☐ Activities pursuant to an approved Revitalization Plan underway

☐ Yes ☒ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

☐ Yes ☒ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?

If yes, list developments or activities below:

☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?

If yes, list developments or activities below:

## **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

### 2. Activity Description

☐ Yes ☐ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip

to component 9. If “No”, complete the Activity Description table below.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected: 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

**9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities**

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. ☒ Yes ☐ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

**2. Activity Description**

- ☒ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset

Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

<b>Designation of Public Housing Activity Description</b>	
1a. Development name: Zia Circle Site	
1b. Development (project) number: NM011-02	
2. Designation type: Occupancy by only the elderly <input checked="" type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>	
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date this designation approved, submitted, or planned for submission: <u>1974</u>	
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <span style="float: right;">N/A</span> <input type="checkbox"/> Revision of a previously-approved Designation Plan?	
6. Number of units affected: 10	
7. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development	

## **10. Conversion of Public Housing to Tenant-Based Assistance**

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

### **A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act**

1. ☐ Yes ☒ No: Have any of the PHA’s developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If “No”, skip to component 11; if “yes”, complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

#### **2. Activity Description**

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 11. If “No”, complete the Activity Description table below.

Conversion of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. What is the status of the required assessment? <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: ) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

**B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937**

**C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937**

**11. Homeownership Programs Administered by the PHA N/A**

[24 CFR Part 903.7 9 (k)]

**A. Public Housing**

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. ☐ Yes ☒ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)
5. Number of units affected: 6. Coverage of action: (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

**B. Section 8 Tenant Based Assistance**

1. ☒ Yes ☐ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

- ☒ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- ☒ 25 or fewer participants  
☐ 26 - 50 participants  
☐ 51 to 100 participants  
☐ more than 100 participants

b. PHA-established eligibility criteria

- ☒ Yes ☐ No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

- Be a participant in the Section 8 rental assistance program with the Housing Authority for a minimum of one year;
- Be a Section 8 recipient in good standing; i.e.: the family has not violated any Section 8 requirements;
- Meet HUD first time homebuyer’s definition;
- Meet all eligibility criteria as specified in the Taos Housing Authority Administrative Plan.
- Have been receiving Section 8 rental assistance through Taos County Housing Authority.
- Sign statement of Homeownership Obligations Agreements prescribed by HUD and comply with the provision of the Agreement;
- Agree to us this home as sole residence.
- Comply with all MFA and lender requirements; attend homeownership counseling prior to purchase and post

purchase, which is offered by Taos County Housing Authority counseling providers;

- Secure the family's own financing through a Taos County Housing Authority approved lender;
- Be able to make the monthly mortgage payment;
- Sign a release allowing Taos County Housing Authority and lending facility to exchange information;
- Allow their portion of the payment to be collected by the Taos County Housing Authority through electronic withdrawal. Funds for electronic withdrawal must be between the 1<sup>st</sup> and 5<sup>th</sup> of the month;
- Provide cash down payment of \$1,000 to 5% of the family assets, which ever is greater.
- Find and close on a home within 180 days of issuance of a certificate unless waved by Taos County Housing Authority;
- Report on the progress in locating a unit to such intervals and times determined by Taos County Housing Authority;
- Enter into a sales contract with the seller;
- Secure an independent, professional house inspector to inspect the house and support by Taos County Housing Authority;
- Agree to maintain the condition of the house to comply with the minimum Housing Quality Standard;
- Acknowledge that termination of assistance for failure to comply will follow termination process as stated in HUD Section 8 Rental Assistance Regulations and Taos County Housing Authority's Section 8 Rental Assistance and Homeownership Administrative Plans.
- Acknowledge that family becomes obligated for the whole mortgage payment in event of termination of assistance;
- The family may not sell the house unless Taos County Housing Authority has approved said sale.

## **12. PHA Community Service and Self-sufficiency Programs**

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

### **A. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

☒ Yes ☐ No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? 04/15/1999

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- ☒ Client referrals
- ☒ Information sharing regarding mutual clients (for rent determinations and otherwise)
- ☒ Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- ☐ Jointly administer programs
- ☐ Partner to administer a HUD Welfare-to-Work voucher program
- ☐ Joint administration of other demonstration program
- ☐ Other (describe)

**B. Services and programs offered to residents and participants**

**(1) General**

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- ☒ Public housing rent determination policies
- ☒ Public housing admissions policies
- ☒ Section 8 admissions policies
- ☐ Preference in admission to section 8 for certain public housing families
- ☐ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☐ Preference/eligibility for public housing homeownership option participation
- ☐ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

- ☒ Yes ☐ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents?

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
<i>Family Self-Sufficiency</i>	<i>61</i>	<i>Specific Criteria</i>	<i>PHA Office</i>	<i>Both</i>
Resident Advisory Board	5	Residents	<i>PHA Office</i>	<i>Both</i>
After School Program	13	PHA Children	<i>PHA Office</i>	Public Housing
School Supply Program	300	PHA/Section 8	<i>PHA Office</i>	<i>Both-Children</i>
Hibac Social Security	274	Specific Criteria	<i>PHA Office</i>	<i>Both</i>
Security/Utility Deposits	200	Specific Criteria	<i>PHA Office</i>	<i>Both</i>
Prescription Assistance	300	Specific Criteria	<i>PHA Office</i>	<i>Both</i>
Rural Housing Services	55	Specific Criteria	<i>PHA Office</i>	<i>Both</i>
Energy Assistance	400	Specific Criteria	<i>PHA Office</i>	<i>Both</i>
Homeownership Counseling Services Family/Individuals Crisis Intervention Services	15-30  215	Specific Criteria	<i>PHA Office</i>	<i>Section 8</i>  <i>Both</i>

## **(2) Family Self Sufficiency program/s**

### **a. Participation Description**

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: 03/08/2005)
Public Housing	15	17
Section 8	12	44

- b. ☒ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?

If no, list steps the PHA will take below:

### **C. Welfare Benefit Reductions**

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- ☒ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- ☒ Informing residents of new policy on admission and reexamination
- ☒ Actively notifying residents of new policy at times in addition to admission and reexamination.

- ☒ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- ☒ Establishing a protocol for exchange of information with all appropriate TANF agencies
- ☐ Other: (list below)

**D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937**

### **13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

#### **A. Need for measures to ensure the safety of public housing residents**

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- ☐ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- ☐ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- ☒ Residents fearful for their safety and/or the safety of their children
- ☒ Observed lower-level crime, vandalism and/or graffiti
- ☒ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- ☐ Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- ☐ Safety and security survey of residents
- ☒ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☒ Resident reports
- ☒ PHA employee reports
- ☒ Police reports
- ☐ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- ☐ Other (describe below)

1. Which developments are most affected? Gusdorf Site, Casitas de Penasco, Cervantes Site, Linda Vista.

**B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year**

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- ☐ Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- ☒ Crime Prevention through Environmental Design
- ☒ Activities targeted to at-risk youth, adults, or seniors
- ☐ Volunteer Resident Patrol/Block Watchers Program
- ☐ Other (describe below)

2. Which developments are most affected? Gusdorf Site, Casitas de Penasco, Cervantes Site, Linda Vista, Casitas de Taos, Casitas de Questa.

**C. Coordination between PHA and the police**

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- ☐ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- ☒ Police provide crime data to housing authority staff for analysis and action
- ☒ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- ☒ Police regularly testify in and otherwise support eviction cases
- ☐ Police regularly meet with the PHA management and residents
- ☒ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- ☐ Other activities (list below)

2. Which developments are most affected? Gusdorf Site, Casitas de Penasco, Cervantes Site, Linda Vista, Casitas de Taos, Casitas de Questa.

**D. Additional information as required by PHDEP/PHDEP Plan**

PHAs eligible for FY 2005 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- ☐ Yes ☒ No: Has the PHA included the PHDEP Plan for FY 2005 in this PHA Plan?
- ☐ Yes ☒ No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

## **14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

*See attachment G*

## **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

## **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☒ Yes ☐ No: Were there any findings as the result of that audit?
4. ☐ Yes ☒ No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? \_\_\_\_\_
5. ☒ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?

## **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☐ Yes ☒ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
  - ☒ Not applicable
  - ☐ Private management
  - ☐ Development-based accounting
  - ☐ Comprehensive stock assessment
  - ☐ Other: (list below)

3. ☐ Yes ☒ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

### **A. Resident Advisory Board Recommendations**

1. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- ☐ Attached at Attachment (File name)
- ☐ Provided below:
3. In what manner did the PHA address those comments? (select all that apply)
- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary.
- ☐ The PHA changed portions of the PHA Plan in response to comments  
List changes below:
- ☐ Other: (list below)

### **B. Description of Election process for Residents on the PHA Board**

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2. ☒ Yes ☐ No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

#### **3. Description of Resident Election Process**

##### **a. Nomination of candidates for place on the ballot: (select all that apply)**

- ☒ Candidates were nominated by resident and assisted family organizations
- ☐ Candidates could be nominated by any adult recipient of PHA assistance
- ☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot
- ☐ Other: (describe)

##### **b. Eligible candidates: (select one)**

- ☐ Any recipient of PHA assistance
- ☒ Any head of household receiving PHA assistance

- ☒ Any adult recipient of PHA assistance
- ☒ Any adult member of a resident or assisted family organization
- ☐ Other (list)

c. Eligible voters: (select all that apply)

- ☐ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- ☒ Representatives of all PHA resident and assisted family organizations
- ☐ Other (list)

### **C. Statement of Consistency with the Consolidated Plan**

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: State of New Mexico
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
  - ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
  - ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
  - ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
  - ☐ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
  - ☐ Other: (list below)
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

### **D. Other Information Required by HUD**

Use this section to provide any additional information requested by HUD.

## **Attachments**

Use this section to provide any additional attachments referenced in the Plans.

# Attachment No. C – Operating Budget

## Operating Fund Calculation of Operating Subsidy PHA-Owned Rental Housing

U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing

OMB Approval No. 2577-0029 (exp. 06/30/2006)

Section 1					
a) Name and Address of Public Housing Agency Taos County Housing Authority 4239 NDCBU Taos, NM 87571				b) Budget Submission to HUD required <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				c) Type of Submission <input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision No.	
d) No. of HA Units 164	e) Unit Months Available (UMAs) 1968	f) Subject FYE 06/30/2006	g) ACC Number FW156	h) Operating Fund Project Number NM03800105J	i) DUNS Number 618044184

Section 2			
Line No.	Description	Requested by PHA (PUM)	HUD Modifications (PUM)
<b>Part A. Allowable Expenses and Additions</b>			
01	Previous allowable expense level (Part A, Line 08 of form HUD-52723 for previous year)	255.69	
02	Part A, Line 01 multiplied by .005	1.29	
03	Delta from form HUD-52720-B, if applicable (see instructions)		
04	"Requested" year units from latest form HUD-52720-A (see instructions)		
05	Add-ons to allowable expense level from previous fiscal year (see instructions)		
06	Total of Part A, Lines 01, 02, 03 and 05	256.98	
07	Inflation factor	1.032	
08	Revised allowable expense level (AEL) (Part A, Line 06 times Line 07)	258.01	
09	Transition Funding	-0-	
10	Increase to AEL	-0-	
11	Allowable utilities expense level from form HUD-52722-A	61.40	
12	Actual PUM cost of Independent Audit (IA) (Through FYE 2004)	3.50	
13	Costs attributable to deprogrammed units		
14	<b>Total Allowable Expenses and Additions (Sum of Part A, Lines 08 thru 13)</b>	322.91	
<b>Part B. Dwelling Rental Income</b>			
01	Total rent roll (as of 02/1/2005)	\$ 22,176.00	
02	Number of occupied units as of rent roll date	152	
03	Average monthly dwelling rental charge per unit for current budget year (Part B, Line 01 ÷ Line 02)	145.89	
04	Average monthly dwelling rental charge per unit for prior budget year	145.64	
05	Average monthly dwelling rental charge per unit for budget year 2 years ago	155.76	
06	Three-year average monthly dwelling rental charge per unit ((Part B, Line 03+Line 04+Line 05) ÷ 3)	149.09	
07	50/50 Income split ((Part B, Line 03 + Line 06) ÷ 2)	147.49	
08	Average monthly dwelling rental charge per unit (lesser of Part B, Line 03 or Line 07)	145.89	
09	Rental income adjustment factor	1.03	1.
10	Projected average monthly dwelling rental charge per unit (Part B, Line 08 times Line 09)	150.27	
11	Projected occupancy percentage from form HUD-52728	95 %	%
12	<b>Projected average monthly dwelling rental income per unit (Part B, Line 10 times Line 11)</b>	142.76	
<b>Part C. Non-dwelling Income</b>			
01	Other income	10.00	
02	<b>Total operating receipts (Part B, Line 12 plus Part C, Line 01)</b>	152.76	
03	<b>PUM deficit or (Income) (Part A, Line 14 minus Part C, Line 02)</b>	170.15	
		Requested by PHA (Whole dollars)	HUD Modifications (Whole dollars)
04	<b>Deficit or (Income) before add-ons (Part C, Line 03 times Section 1, e)</b>	334,855	

Previous edition is obsolete for PHA Fiscal Years beginning 1/1/2004 and thereafter

Page 1

form HUD-52723 (1/2001)

form HUD 50075 (03/2003)

		Project Number: NM03800105J	
Line No.	Description	Requested by PHA (Whole Dollars)	HUD Modifications (Whole Dollars)
<b>Part D. Add-ons for changes in Federal law or regulation and other eligibility</b>			
01	FICA contributions		
02	Unemployment compensation		
03	Family Self Sufficiency Program		
04	Energy Add-On for loan amortization		
05	Unit reconfiguration		
06	Non-dwelling units approved for subsidy 3 Police - 1 Econ Devs Bldg.	12,091	
07	Long-term vacant units		
08	Phase Down for Demolitions		
09	Units Eligible for Resident Participation:		
	Occupied Units (Part B, Line 02)	152	
10	Employee Units	0	
11	Police Units	3	
12	Total Units Eligible for Resident Participation (Sum of Part D, Lines 09 thru 11)	156	
13	Funding for Resident Participation (Part D, Line 12 x \$25)	3,900	
14	Other approved funding, not listed (Specify in Section 3)		
15	Total add-ons (sum of Part D, Lines 01, 02, 03, 04, 05, 06, 07, 08, 13 and 14)	15,991	
<b>Part E. Calculation of Operating Subsidy Eligibility Before Adjustments</b>			
01	Deficit or (Income) before adjustments (Total of Part C, Line 04 and Part D, Line 15)	350,845	
02	Actual cost of Independent Audit (IA)	4,240	
03	Operating subsidy eligibility before adjustments (greater of Part E, Line 01 or Line 02) (If less than zero, enter zero (0))	355,086	
<b>Part F. Calculation of Operating Subsidy Approvable for Subject Fiscal Year (Note: Do not revise after the end of the subject FY)</b>			
01	Utility Adjustment for Prior years		
02	Additional subject fiscal year operating subsidy eligibility (specify)		
03	Unfunded eligibility in prior fiscal years to be obligated in subject fiscal year		
04	HUD discretionary adjustments		
05	Other (specify)		
06	Other (specify)		
07	Unfunded portion due to proration	( ) ( )	
08	Net adjustments to operating subsidy (total of Part F, Lines 01 thru 07)		
09	Operating subsidy approvable for subject fiscal year (total of Part E, Line 03 and Part F, Line 08)	355,086	
<b>HUD Use Only (Note: Do not revise after the end of the subject FY)</b>			
10	Amount of operating subsidy approvable for subject fiscal year not funded		( )
11	Amount of funds obligated in excess of operating subsidy approvable for subject fiscal year		
12	Funds obligated in subject fiscal year (sum of Part F, Lines 09 thru 11) (Must be the same as line 600 of the Operating Budget, form HUD-52064, for the subject fiscal year) Appropriation symbol(s):		
<b>Part G. Memorandum of Amounts Due HUD, Including Amounts on Repayment Schedules</b>			
01	Total amount due in previous fiscal year (Part G, Line 04 of form HUD-52723 for previous fiscal year)		
02	Total amount to be collected in subject fiscal year (Identify individual amounts under Section 3)	( ) ( )	
03	Total additional amount due HUD (include any amount entered on Part F, Line 11) (Identify individual amounts under Section 3)		
04	Total amount due HUD to be collected in future fiscal year(s) (Total of Part G, Lines 01 thru 03) (Identify individual amounts under Section 3)		

		Project Number: NM03800105J	
Line No.	Description	Requested by PHA (Whole Dollars)	HUD Modifications (Whole Dollars)
<b>Part H. Calculation of Adjustments for Subject Fiscal Year</b>			
<b>This part is to be completed only after the subject fiscal year has ended</b>			
01	Indicate the types of adjustments that have been reflected on this form: <input type="checkbox"/> Utility Adjustment <input type="checkbox"/> HUD discretionary adjustment (Specify under Section 3)		
02	Utility adjustment from form HUD-52722-B		
03	Deficit or (Income) after adjustments (total of Part E, Line 01 and Part H, Line 02)		
04	Operating subsidy eligibility after year-end adjustments (greater of Part E, Line 02 or Part H, Line 03)		
05	Part E, Line 03 of latest form HUD-52723 approved during subject FY (Do not use Part E, Line 03 of this revision)		
06	Net adjustments for subject fiscal year (Part H, Line 04 minus Part H, Line 05)		
07	Utility adjustment (enter same amount as Part H, Line 02)		
08	Total HUD discretionary adjustments (Part H, Line 06 minus Line 07)		
09	Unfunded portion of utility adjustment due to proration		
10	Unfunded portion of HUD discretionary adjustment due to proration		
11	Prorated utility adjustment (Part H, Line 07 plus Line 09)		
12	Prorated HUD discretionary adjustment (Part H, Line 08 plus Line 10)		
<b>Section 3</b>			
Remarks (provide part and line numbers)			

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.  
 Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Signature of Authorized HA Representative & Date:	Signature of Authorized Field Office Representative & Date:
X Beatrice Silva, Executive Director 03/29/05	<i>Beatrice Silva</i> 3/29/2005

Previous edition is obsolete for PHA Fiscal Years beginning 1/1/2004 and thereafter

Page 3

form HUD-52723 (1/2001)

# PHA/IHA Board Resolution

Approving Operating Budget or Calculation of  
Performance Funding System Operating Subsidy

U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing

OMB Approval No. 2577-0026 (Exp. 9/30/2006)

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

This information is required by Section 8(c)(4) of the U.S. Housing Act of 1937. The information is the operating budget for the low-income housing program and provides a summary of proposed/budgeted receipts and expenditures, approval of budgeted receipts and expenditures, and justification of certain specified amounts. HUD reviews the information to determine if the operating plan adopted by the PHA and the amounts are reasonable and that the PHA is in compliance with procedures prescribed by HUD. Responses are required to obtain benefits. This information does not lend itself to confidentiality.

Acting on behalf of the Board of Commissioners of the below-named Public Housing Agency (PHA)/Indian Housing Authority (IHA), as its Chairman, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the Board's approval of (check one or more as applicable):

- (date) 03/29/2005
- ☒ Operating Budget Submitted on:
- ☐ Operating Budget Revision Submitted on:
- ☒ Calculation of Performance Funding System Submitted on: 03/29/2005
- ☐ Revised Calculation of Performance Funding System Submitted on:

I certify on behalf of the: (PHA/IHA Name) Taos County Housing Authority  
that:

1. All regulatory and statutory requirements have been met;
2. The PHA has sufficient operating reserves to meet the working capital needs of its developments;
3. Proposed budget expenditures are necessary in the efficient and economical operation of the housing for the purpose of serving low-income residents;
4. The budget indicates a source of funds adequate to cover all proposed expenditures;
5. The calculation of eligibility for Federal funding is in accordance with the provisions of the regulations;
6. All proposed rental charges and expenditures will be consistent with provisions of law;
7. The PHA/IHA will comply with the wage rate requirements under 24 CFR 968.110(e) and (f) or 24 CFR 905.120(c) and (d);
8. The PHA/IHA will comply with the requirements for access to records and audits under 24 CFR 968.110(i) or 24 CFR 905.120(g); and
9. The PHA/IHA will comply with the requirements for the reexamination of family income and composition under 24 CFR 960.209, 990.115 and 905.315.

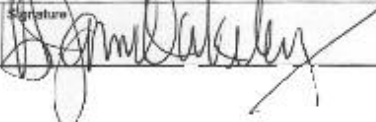
I hereby certify that all the information stated within, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Board Chairman's Name (type)

James H. Oakeley

Signature



Date

03/29/05

Previous edition is obsolete

form HUD-52574 (10/95)  
ref. Handbook 7575.1

## **ATTACHMENT D**

### **TAOS COUNTY HOUSING AUTHORITY HOUSING PLAN TO HOUSE POLICE OFFICER 2005**

In accordance with 24 CFR, Section 906.501 the Taos County Housing Authority has developed this plan for submission to the United States Department of Housing and Urban Development.

The goal of such policy is that the visible presence of Police Officers in public housing will serve as a deterrent to criminal activity and prevention of illegal drugs and any drug-related crimes in and around public housing.

The Taos County Housing Authority will charge a flat rent of \$200 per month for Unit #144, Gusdorf Place and Unit #15, Linda Vista Lane. The Town of Taos Housing Department does not believe that there will be a loss of rent income by renting to the Police Officers at the flat rent. The benefit of housing an officer will off set any loss in rent.

The Police Officers will be required to sign a Dwelling Lease Agreement and will address the conditions of the continued occupancy. The lease will state that the Police Officer's right of occupancy is contingent upon the continuation of employment as a Police Officer with the Town of Taos Police Department, Taos County Sheriff's Department or the New Mexico State Police. It will further state that if the Police officer wants to continue to reside in public housing and is no longer employed as a law enforcement officer, he will be required to transfer to another unit and meet the admission's screening criteria. The Police Officer will be required to sign the Lease Addendum that specifies services they are to provide to the Housing Authority for the privilege of living in Public Housing.

Having a Law Enforcement Officer present in our sites will reduce the potential for crime, vandalism and loitering. It will also increase security for our residents.

Housing a Law Enforcement Officer reside in one of our units will increase the service to the community and our residents. It will attract families to live in the Housing Sites as they will feel safe.

**(REVIEWED AND APPROVED BY HUD)**

**REVIEWED:** \_\_\_\_\_  
**DATE**

**APPROVED:** \_\_\_\_\_ **TITLE** \_\_\_\_\_

**ATTACHMENT D (part of)**  
**TAOS COUNTY HOUSING AUTHORITY**  
**HOUSING PLAN FOR ECONOMIC DEVELOPMENT**  
**2005 RESOURCE UNIT #936**

**SUBJECT: Non-dwelling Unit Request**

In accordance with 24 CFR, Section 906.501, the Taos County Housing Authority has developed this plan for submission to the United States Department of Housing and Urban Development.

The goal of such policy is that the requested unit will be used for the following:

- The unit will be used for the home base to all anti- drug programs which will rid TCHA of drug related crimes and gang prevention.
- During the last year we served 750 children during a service activity.
- We currently partner with the United States Department of Agriculture Rural Development to provide Rural housing Services and Guaranteed Loans plus Home Improvement Loans and Grants to allow very low income home owners to:
  - Borrow up to 20,000.
  - Make need repairs to the home.
  - Make needed improvements to home.
  - Obtain a government loan at 1 percent interest.
  - Loan payable over 20 year period.
  - Grant monies in the amount of \$7,500.
  - RHS Loans and Grants may be leveraged with HOME and other funds.
  - This service is provided at the TCHA Community Center.
- TCHA provides a Food Program for Elderly families this program is in cooperation with the USDA ECHO Commodity Program. The total number of participants is 96. Ninety Six Food boxes are provided monthly, to housing residents, Section 8 Tenants and community elderly individuals.
- The Resource Unit is home to the Home Education Live Hood Program, this program is the first step to childcare. Nutrition program services for Taos County.
- The Resource Unit is home to the Good Neighbor Fund that helps low income families to pay their utility bills.
- The Resource Unit is home to the Med Bank program, which helps individuals of all ages to get their prescriptions medications free from the pharmaceutical companies (PHRMA) Patient Assistance Programs.
- The Resource Unit is the place where low income person can get help with their income tax.
- The Resource Unit is home to the Low Public Housing Resident Council.

*To offset utility cost for this unit, utilities are paid by sister agencies.*

**(REVIEWED AND APPROVED BY HUD)**

**REVIEWED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**APPROVED:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

## ***ATTACHMENT E***

### ***A RESOLUTION OF THE TAOS COUNTY HOUSING AUTHORITY, PUBLIC HOUSING (PHA) ADOPTING A DEFINITION OF "SUBSTANTIAL DEVIATION" AND "SIGNIFICANT AMENDMENT OR MODIFICATION" FROM THE 5-YEAR ANNUAL PLAN***

**WHEREAS**, the Taos County Housing Authority Board acts as the Housing Authority Board (PHA); and,

**WHEREAS**, the Public Housing Authorities must define the terms "Substantial Deviation" and "Significant Amendment or Modification" by stating the basic criteria for such definitions in an annual plan that has met full public process and RAB review; and,

**WHEREAS**, the PHA has considered and approved a Five-Year Plan that complies in all respects with Federal Guidelines; and,

**WHEREAS**, the PHA is required to define "Significant Amendment or Modification", from the Five-Year Plan, reference HUD Notice PIH 99-51; and,

**WHEREAS**, the Five-Year Plan was adopted, in its entirety, at the Regular Meeting of the Taos County Housing Authority Board April 6, 2004; and,

**WHEREAS**, the Five Year Plan does not have a definition for "Substantial Deviation" and "Significant Amendment or Modification" and therefore these definitions need to be adopted, amended and attached to the PHA Five-Year Plan.

**NOW, THEREFORE, BE IT RESOLVED**, by the Taos County Housing Board, that the Five-Year Plan is hereby amended, adopted and attached to include a Definition of "Significant Amendment or Modification" and "Substantial Deviation" as follows:

In accordance with HUD's Final Rule (903.7(r)) the Taos County Housing Authority defines the basic criteria for "Substantial Deviation" and "Significant Amendment or Modification" as it applies to the Five-Year and Annual Plan, as follows:

**Significant Amendment or Modification** – means;

- A) any changes to rent or admissions policies or organization of the waiting list;
- B) additions of non-emergency work items (items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and
- C) any change with regard to demolition or disposition, designation homeownership program or conversion activities.

**Substantial Deviation** - means the Housing Authority (PHA) shall have the authority to deviate from the Five Action Plan up to \$25,000.00 in Capital Funding Program funds without full public hearing or HUD review before implementation.

**PASSED, ADOPTED, AND APPROVED**, this \_\_\_\_\_ day \_\_\_\_\_ 2005 at the Regular Meeting of the Taos County Housing Authority Board.

\_\_\_\_\_  
JAMES OAKELEY, CHAIRMAN

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MARGARET VIGIL, VICE CHAIRMAN

---

LUCILLE MASCARENAS, MEMBER

---

STEPHEN C. TRUJILLO, MEMBER

---

ORLANDO G. "ANDY" VIGIL, MEMBER (RAB)

ATTEST TO:

---

BEATRICE SILVA, SECRETARY

## **PET OWNERSHIP POLICY**

### **A. Exemption from the Pet Rules for Service and Companion Animals**

These rules do not apply to service or companion animals needed by a person with a documented disability who has a disability-related reason for needing an animal. For these individuals, the Housing Authority may require documentation from a qualified medical practitioner limited to:

1. Verification that the person making the request is a person with a disability;
2. Verification that the animal is needed by a person with a disability, either to provide a service or to act as a companion;
3. Verification that the animal owned by the individual with a disability will meet the need identified;
4. Verification that someone in the household is able to care for the animal or that alternative arrangements that will not impair the animal's health or safety have been made.

### **B. Pet Rules**

The following rules shall apply for the keeping of common household pets by Residents living in the units operated by the Housing Authority.

1. Common household pets as authorized by this policy means a domesticated animals, such as cats, dogs, fish, birds, rodents (including rabbits) and turtles, that are traditionally kept in the home for pleasure rather than for commercial purposes.
2. Each resident family will be allowed to house only one (1) warm blooded animal at any time, one 10 gallon fish tank or one cage with up to 4 birds. Visiting guests with pets will not be allowed.
3. Each resident must register his/her pet with the Authority **BEFORE** it is brought onto the Authority premises, and must update the registration annually at the annual re-examination of income. The registration will include: (*Appendix 1*)
  - Information sufficient to identify the pet and to demonstrate that it is a common household pet, including a picture;
  - A certificate signed by a licensed veterinarian or a State or Local Authority empowered to inoculate animals, stating that the pet has received all inoculations required by applicable State and Local Law;
  - The name, address, and telephone number of one or more responsible parties who will care for the pet if the pet owner dies, is incapacitated, or is otherwise unable to care for the pet.
  - A statement indicating that the pet owner has read the pet rules and agrees to comply with them; (*Appendix 2*)
  - The Authority may refuse to register a pet if:
    - a) The pet is not a common household pet;
    - b) The keeping of the pet would violate any applicable house pet rule;
    - c) The pet owner fails to provide complete pet registration information;
    - d) The pet owner fails to update the pet registration annually;
    - e) The Authority reasonably determines, based on the pet owners' habits and practices and the pet's temperament, that the pet owner will be unable to keep the pet in compliance with the pet rules and other legal obligations;
  - Financial ability to care for the pet will not be a reason for the Authority to refuse to register a

- pet.
- The Authority will notify the pet owner if the Authority refuses to register a pet. The notice will:
    - f) State the reasons for refusing to register the pet;
    - g) Be served on the pet owner in accordance with procedure outlined in paragraph B1 of this policy; and
    - h) Be combined with a notice of a pet rule violation if appropriate.
4. Cats and dogs shall be limited to small breeds where total adult weight shall not exceed twenty five (25) pounds and total height at the shoulder shall not exceed eighteen (18) inches. The size limitations do not apply to service animals.
  5. No chows, pit bulls, Dobermans, Rottweilers, or any other known fighter breed will be allowed on the premises.
  6. All cat and dog pets shall verified by veterinarian to be neutered or spayed, cost to be paid by the owner. Pet owners will be required to present a certificate of health from their veterinarian verifying all required annual vaccines, initially and at re-examination.
  7. A non-refundable pet fee of \$100 per bedroom in the pet owner's unit shall be made to the Housing Authority. Such fee will be a one-time fee (per pet) and shall be used to help cover cost of damages to the unit caused by the pet.
  8. Pets shall be quartered in the Resident's unit.
  9. Dogs and cats shall be kept on a leash and controlled by a responsible individual when taken outside.
  10. No dog houses will be allowed on the premises.
  11. Visiting guests with pets (other than service animals to assist visitors with disabilities) will not be allowed. Pets (dogs and cats), shall be allowed to run only on the owner's lawn and owners shall clean up after pet after each time the animal eliminates.
  12. Any applicable City Ordinances concerning pets will be complied with.
  13. The pet owner is responsible for the pet's health and condition.
  14. Pets shall be removed from the premises when their conduct or condition is duly determined to constitute a nuisance or a threat to the health and safety of the pet owner, other occupants of the Authority, or the pet, in accordance with paragraph C3 below.
  15. Birds must be kept in regular bird cages and not allowed to fly throughout the unit.
  15. Dishes or containers for food and water will be located within the owner's apartment. Food and/or table scraps, will not be deposited on the owner's porches or yards.
  16. Residents will not feed or water stray animals or wild animals.
  17. Pets will not be allowed on specified common areas (under clotheslines, social rooms, office, maintenance space, playgrounds, etc.).
  18. Each resident family will be responsible for the noise or odor caused by their pet. Obnoxious odors can cause health problems and will not be tolerated.

### C. Pet Violation Procedure

1. **NOTICE OF PET RULE VIOLATION (Appendix 3):** When the Authority determines on the

basis of objective facts supported by written statements, that a pet owner has violated one or more of these rules governing the owning or keeping of pets, the Authority will:

- Serve a notice of the pet rule violation on the owner by sending a letter by first class mail, properly stamped and addressed to the Resident at the leased dwelling unit, with a proper return address, or
  - serve a copy of the notice on any adult answering the door at the Residents' leased dwelling unit, or if no adult responds, by placing the notice under or through the door, if possible, or else by attaching the notice to the door;
2. The notice of pet rule violation must contain a brief statement of the factual basis for the determination and the pet rule or rules alleged to be violated;
  3. The notice must state that the pet owner has ten (10) days from the effective date of service of notice to correct the violation (including, in appropriate circumstances, removal of the pet) or to make a written request for a meeting to discuss the violation. The effective date of service is the day that the notice is delivered or mailed, or in the case of service by posting, on the day that the notice was initially posted;
  4. The notice must state that the pet owner is entitled to be accompanied by another person of his or her choice at the meeting;
  5. The notice must state that the pet owner's failure to correct the violation, to request a meeting, or to appear at a requested meeting may result in initiation of procedures to terminate the pet owner's lease.
  6. **PET RULE VIOLATION MEETING:** If the pet owner makes a timely request for a meeting to discuss an alleged pet rule violation, the Authority shall establish a mutually agreeable time and place for the meeting to be held within fifteen (15) days from the effective date of service of the notice of pet rule violation (unless the Authority agrees to a later date).
    - The Authority and the pet owner shall discuss any alleged pet rule violation and attempt to correct it and reach an understanding.
    - The Authority may, as a result of the meeting, give the pet owner additional time to correct the violation.
    - Whatever decision or agreements, if any, are made will be reduced to writing, signed by both parties, with one copy for the pet owner and one copy placed in the Authority's Resident file.
  7. **NOTICE OF PET REMOVAL:** If the pet owner and the Authority are unable to resolve the pet rule violation at the pet rule violation meeting, or if the Authority determines that the pet owner has failed to correct the pet rule violation within any additional time provided for this purpose under paragraph B.3 above (or at the meeting, if appropriate), requiring the pet owner to remove the pet. This notice must:
    - Contain a brief statement of the factual basis for the determination and the pet rule or rules that have been violated;
    - State that the pet owner must remove the pet within ten (10) days of the effective date of service of notice or pet removal (or the meeting, if the notice is served at the meeting);
    - State the failure to remove the pet may result in initiation of procedures to terminate the pet owner's residency.
  8. **INITIATION OF PROCEDURE TO TERMINATE PET OWNERS RESIDENCY:** The Authority will not initiate procedure to terminate a pet owners' residency based on a pet rule violation unless:
    - The pet owner has failed to remove the pet or correct the pet rule violation within the applicable time period specified above;
    - The pet rule violation is sufficient to begin procedures to terminate the pet owner's residency

under the terms of the lease and application regulations,

- Provisions of Resident's Lease, Section XIV: Termination of Lease will apply in all cases.

#### **D. Protection of the Pet**

1. If the health or safety of a pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet, the Authority may:

- Contact the responsible party or parties listed in the registration form and ask that they assume responsibility for the pet;
- If the responsible party or parties are unwilling or unable to care for the pet, the Authority may contact the appropriate State or Local Animal Control Authority, Humane Society or designated agent of such Authority and request the removal of the pet;
- If the Authority is unable to contact the responsible parties despite reasonable efforts, action as outlined in 1 b above will be followed; and
- If none of the above actions produce results, the Authority may enter the pet owner's unit, remove the pet, and place the pet in a facility that will provide care and shelter until the pet owner or a representative of the pet owner is able to assume responsibility for the pet, but no longer than thirty (30) days. The cost of the animal care facility provided under this section shall be charged to the pet owner.

#### **E. NUISANCE OR THREAT TO HEALTH OR SAFETY**

Nothing in this policy prohibits the Authority or the Appropriate City Authority from requiring the removal of any pet from the Authority property if the pet's conduct or condition is duly determined to constitute, under the provisions of State or Local Law, a nuisance or a threat to the health or safety of other occupants of the Authority property or of other persons in the community where the project is located.

#### **F. APPLICATION OF RULES**

- 1 Pet owners will be responsible and liable for any and all bodily harm to other residents or individuals. Destruction of personal property belonging to others caused by owner's pet will be the financial obligation of the pet owner.
- 2 All pet rules apply to resident and/or resident's guests.

## Appendix I

### Pet Agreement

1. Management considers the keeping of pets a serious responsibility and a risk to each resident in the apartment. If you do not properly control and care for a pet, you will be held liable if it causes any damages or disturbs other residents.
2. Conditional Authorization for Pet. You may keep the pet that is described below in the apartment until Dwelling Lease is terminated. Management may terminate this authorization sooner if your right of occupancy is lawfully terminated or if you or your pet, your guests or any member of your household violate any of the rules contained in the Authority's pet Policy or this Agreement.
3. Pet Fee. The Pet Fee will be \$100 times the number of bedrooms in your unit for your current pet. The Pet Fee is a one-time, non-refundable charge.
  - If, at any time in the future, this pet is replaced by another animal, another one-time fee will be charged for that animal.
  - This fee will be used to pay reasonable expenses directly attributable to the presence of the pet in the complex, including but not limited to, the cost of repairs to and fumigation of the apartment.
4. Liability Not Limited. The fee under this Pet Agreement does not limit resident's liability for property damages, cleaning, deodorization, defleaing, replacements, or personal injuries.
5. Description of Pet. You may keep only one pet as described below. The pet may not exceed eighteen (18) inches in height at the shoulder and twenty five (25) pounds in adult weight. You may not substitute other pets for this one without amending this agreement.

Pet's Name \_\_\_\_\_ Type \_\_\_\_\_

Breed \_\_\_\_\_ Color \_\_\_\_\_ Weight \_\_\_\_\_ Age \_\_\_\_\_

Housebroken? \_\_\_\_\_ City of License \_\_\_\_\_ License No. \_\_\_\_\_

Date of last Rabies shot \_\_\_\_\_

Name, address and phone number of person able to care for pet in case of resident's permanent or temporary inability to care for animals

Name \_\_\_\_\_

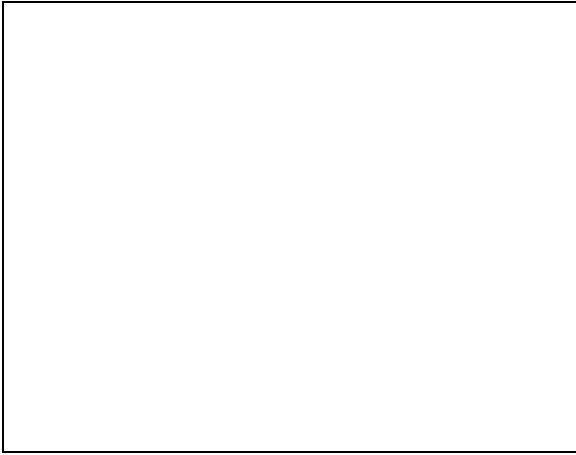
Address \_\_\_\_\_

Phone \_\_\_\_\_

## Appendix 2

### Pet Policy Certification

Attach photo of Pet here



By \_\_\_\_\_

Title \_\_\_\_\_

Housing Authority

Resident \_\_\_\_\_

Resident \_\_\_\_\_

Resident \_\_\_\_\_

I have read, fully understand and will abide by the rules and regulations contained in the Housing Authority Pet Policy and in this Pet Agreement.

**Appendix 3**  
**Pet Policy Rules Violation Notice**

DATE: \_\_\_\_\_

—

TIME: (IF DELIVERED) \_\_\_\_\_ A.M.  
/ P.M.

TO: \_\_\_\_\_

—

NAME OF RESIDENT: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

—

**CITY, STATE, ZIP CODE**

PET NAME OR TYPE: \_\_\_\_\_

This notice hereby informs you of the following pet rule violation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Factual Basis for Determination of Violation: \_\_\_\_\_

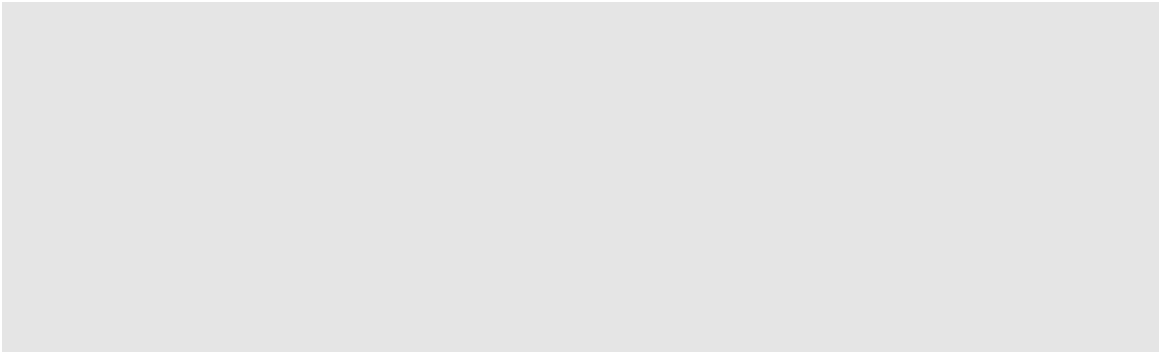
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

As pet owner you have ten (10) calendar days from the date shown on this notice (date notice delivered or mailed) in which to correct the violation or make a written request for a meeting to discuss the violation.

As pet owner you are entitled to be accompanied by another person of your choice at the meeting.

Failure to correct the violation, to request a meeting, or to appear at the requested meeting may result in initiation of procedures to terminate your tenancy.

\_\_\_\_\_  
Executive Director



# Attachment No. L

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary			Grant Type and Number	
PEA Name: TAOS COUNTY HOUSING AUTHORITY			Capital Fund Program NM02H038501-04:	
4239 NDCER			Replacement Housing Factor Grant No:	
TAOS, NM 87571			Federal FY of Grant: 2004	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Final Performance and Evaluation Report				
Evaluation Report for Period Ending: <input type="checkbox"/> Original Annual Statement (revision no 2) Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost	Total Actual Cost	
		Original	Revised	Obligated
1	Total non-CFP funds			Expended
2	1406 Operations	\$30,945.00		
3	1408 Management Improvements			
4	1410 Administration	\$35,000.00		
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs	\$22,450.00		
8	1440 Site Acquisition			
9	1450 Site Improvements			
10	1460 Dwelling Structures	\$199,405.00	\$169,405.00	
11	1465 1 Dwelling Equipment- Nonexpendable			
12	1470 Nondwelling Structures	\$35,000.00	\$65,000.00	
13	1475 Nondwelling Equipment	\$45,333.00		
14	1485 Demolition			
15	1490 Replacement Reserve			
16	1492 Moving to Work Demonstration			
17	1495 1 Relocation Costs			

**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:  
Summary**

PHA Name: Taos County Housing Authority		Grant Type and Number Capital Fund Program: N3402P038501-04 Capital Fund Program: Replacement Housing Factor Grant No:		2004
<input type="checkbox"/> Original Annual Statement 12/31/02 <input type="checkbox"/> Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report Revised Annual Statement No. 1				
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost
19.	1502 Contingency			
20.	Amount of Annual Grant: (sum of lines 2-19)	\$368,122.00		
21.	Amount of line 20 Related to LBP Activities			

## Federal FY of Grant: 2004

[illegible]



**Attachment No. M**

# **Annual Statement/Performance and Evaluation Report** **Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:** **Summary**

PHA Name:		Grant Type and Number		2003	
Tuos County Housing Authority		Capital Fund Program: NM02P038501-03 Capital Fund Program			
		Replacement Housing Factor Grant No:			
Original Annual Statement 12/31/02					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Reserve for Disasters/ Emergencies Revised Annual Statement <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Original	Revised	Obligated	Expended
		Total Estimated Cost		Total Actual Cost	
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	\$23,000		0	
4	1410 Administration	\$15,827.	\$15,827	\$15,827	\$15,827.
5	1411 Audit				
6	1415 Liquidated Damages				
415,82	1430 Fees and Costs	\$15,827.	\$23,000.	\$23,000.	\$23,000.
7					
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$103,619.	.	.	
11	1465.1 Dwelling Equipment/Nonexpendable				
12	1470 Nondwelling Structures		\$119,446.	\$119,446.	\$119,446.
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				

# **Annual Statement/Performance and Evaluation Report** **Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:** **Summary**

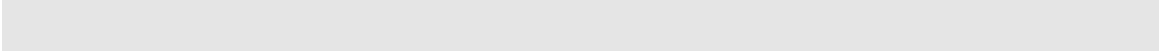
PIHA Name:		Grant Type and Number		2003	
Taos County Housing Authority		Capital Fund Program: NM02P038501-03 Capital Fund Program			
Original Annual Statement 12/31/02		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Replacement Housing Factor Grant No:		Revised Annual Statement	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)		\$158,273.		
21	Amount of line 20 Related to LBP Activities				

**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:  
Summary**

PHA Name:  Taos County Housing Authority		Grant Type and Number Capital Fund Program: NM02P038501-03 Capital Fund Program Replacement Housing Factor Grant No:		2003
Original Annual Statement 12/31/02				
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement <input type="checkbox"/> Final Performance and Evaluation Report				
Lin	Summary by Development Account	Total Estimated Cost		
e	No.	Total Actual Cost		
23	Amount of line 20 Related to Security	\$119,446.		
24	Amount of line 20 Related to Energy Conservation Measures	\$119,446.		

Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)  
Part II: Supporting Pages

[illegible]



PHA Name:	Grant Type and Number	Fiscal Year or Grant
Taos County Housing Authority	Capital Fund Program #: NM02P038501-03 Capital Fund Program Renflement Housing Factor #:	2003

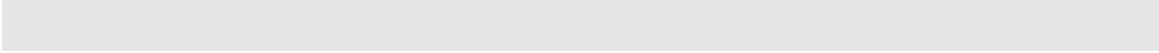
[illegible]

# Attachment No. P

<input type="checkbox"/> Annual Statement/Performance and Evaluation Report <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:</b> <b>Summary</b>					
PFA Name: Town of Taos Housing Authority		Grant Type and Number Capital Fund Program: NM02P0111502-03 Capital Fund Program: Replacement Housing Factor Grant No.:		2003	
<input type="checkbox"/> Original Annual Statement 02/17/2004 <input type="checkbox"/> Performance and Evaluation Report for Period Ending: X Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Original	Revised	Obligated	Expended
		Total Estimated Cost		Total Actual Cost	
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	\$3,110.00		\$3,110.00	\$3,110.00
5	1411 Audit				
6	1415 Liquidated Damages				
415	1430 Fees and Costs				
82					
7					
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment/Nonexpendable				
12	1470 Nondwelling Structures	\$27,992.00		\$27,992.00	\$27,992.00
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I:**  
**Summary**

PHA Name: Town of Taos Housing Authority		Grant Type and Number Capital Fund Program: NM02P0111502-03 Capital Fund Program Replacement Housing Factor Grant No:		2003
Original Annual Statement 02/17/2004		<input type="checkbox"/> Reserve for Disasters/ Emergencies Revised Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: X Final Performance and Evaluation Report		
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>
18	1498 Mod Used for Development			
19	1502 Contingency			
20	Amount of Annual Grant: (sum of lines 2-19)	\$31,102.00		
21	Amount of line 20 Related to LBP Activities			





## PHA Plan Table Library

### Component 7 Capital Fund Program Annual Statement Parts I, II, and II

#### Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number NM02P038501-05 FFY of Grant Approval: 07/2005

☒ Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	-0-
2	1406 Operations	\$6,643.00
3	1408 Management Improvements	
4	1410 Administration	\$35,000.00
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	\$25,000.00
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	\$250,000.00
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Non-dwelling Structures	\$2,500.00
13	1475 Non-dwelling Equipment	\$30,000.00
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	\$10,000.00
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	\$250,000.00
24	Amount of line 20 Related to Energy Conservation	\$250,000.00

	Measures	
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**Annual Statement**

**Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
	See Annual Statement /Performance and Evaluation Report – Attachment A		

**Annual Statement**

**Capital Fund Program (CFP) Part III: Implementation Schedule**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
	See Attachment A	

## Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years.  
 Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement. *N/A*

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
Description of Needed Physical Improvements or Management Improvements			Estimated Cost
N/A			
Total estimated cost over next 5 years			

## Optional Public Housing Asset Management Table      N/A

See Technical Guidance for instructions on the use of this table, including information to be provided.

Public Housing Asset Management						
Component Identification	Activity Description					
Number and Type of units	Capital Fund Program Parts II and III <i>Component 7a</i>	Development Activities <i>Component 7b</i>	Demolition / disposition <i>Component 8</i>	Designated housing <i>Component 9</i>	Conversion <i>Component 10</i>	Home-ownership <i>Component 11a</i>